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CONFIRMATION NO. 9118

Bib Data Sheet

SERIAL NUMBER 10/769,962	FILING DATE 02/02/2004 RULE	CLASS 128	GROUP ART UNIT 3743	ATTY DOC 10:
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APPLICANTS

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** CONTINUING DATA *yes* *SL*This appln claims benefit of 60/444,578 02/03/2003
and claims benefit of 60/517,593 11/05/2003** FOREIGN APPLICATIONS *None* *SL*

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED

** 04/30/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IN	SHEETS DRAWING 5	TOTAL CLAIMS 31	INDE
Verified and Acknowledged Examiner's Signature <i>SL</i>	Initials <i>SL</i>				

ADDRESS

BRINKS HOFER GILSON & LIONE

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46204

TITLE

Tracheostomy tube and loading dilator

FILING FEE

FEES: Authority has been given in Paper
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ACCOUNT

No. _____ for following:

- All Fees
- 1.16 Fees (Filing)
- 1.17 Fees (Proc Ext. of time)
- 1.18 Fees (Issuance)
- Other _____
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